FOR INSTRUCTIONS, SEE BACK OF FORM DISCLOSURE SUMMARY PAGE

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FORM

DISCLOSURE SUMMARY PA	GE L		DR-2	DISCLOSURE
COMMITTEE NAME (Must be same as on Statement of Organiza	ntion)	<u></u>	lev. 12/2005)	REPORT
IMPORTANT: Indicate by # type of committee you are reporting for (1) Statewide/Legislative/Judge Standing for Retention Candidate (4) County Central Committee (5) County Candidate (6) City Cand Political Subdivision Candidate (5) County PAC (2) City PAC (1) Subdivision PAC (11) Local Ballot Issue CANDIDATE COMMITTEES CNLY:	(2)State PAC (3)State Party lidate (7)School Board or Other	₽₽ Cc Lc \$0	or Office Use O	9046
Candidate Name	Political Party (if applicable)		File with: lowe Ethics and	Campaign =
Office Sought	District (if Senate or House)		Disclosure Boai 510 E. 12 ^m , Ste. Des Moines, lot Fex: 515-281-3'	1A CT Wa 50319 -D
Late reports are subject to possible civil and criminal penalties. Pur the candidate, for a candidate's committee, and the chairperson, for individual responsible for filing timely and accurate reports.	r any other type of committee, is th	¥A(7)		**
Michele Bson	712-654-85	565	· ·	7-14-18
MONATURE OF PERSON FILING REPORT	TELEPHONE		DATE S	
AM FILING A Guly 15 2010	REPORT FOR (1) BLECTION /(2	`	CTION YEAR.	
(report date)	Indicate by #	* [4]		
CHECK IF AMENDMENT TO REPORT DATED		Local Com	mittees, enter C	ate of Election
STATEMEN CASH ON HAND at the beginning of the reporting period. (Total of a	IT OF CASH ON HAND			
committee. This amount MUST be the same as the cash of the last reporting period or must be zero if this is first n	on hand at the end	\$	150	18.24
ADD TOTAL MONEY TAKEN IN THIS PERIOD			, "	2m 1m 2m
Schedule A: Cash Contributions total (Attach Schedule A) ("ziso see in-kind below)	**********		500
Schedule F: Loans Received total (Attach Schedule F)				
Schedule H: Total Sales of Campaign Property (Attach Sc	hedule H)	1400701100777		
(Schedule H applies to Candidates' Commi				/
	SUB-TOTAL		<u> 177</u>	3.24
SUBTRACT TOTAL MONEY SPENT THIS PERIOD			21	(Soid
Schedule B; Expenditures total (Attach Schedule B) (**ai			0.0	3 .00
Schedule F: Loan Repayments total (Affach Schedule F).		***********	- 	500 68.24
CASH ON HAND at the end of this reporting period (if final report babe zero) (Attach DR-3)		\$	79	68.24
*UNPAID BILLS (From Schedule D - Attach Schedule D)	===== ================================	\$		
IN KIND CONTRIBUTIONS (From Schedule E - Allach Schedule E).	 	\$	********	
*OUTSTANDING LOANS (From Schedule F - Altach Schedule F)	EEE 37 27 77 77 74 777 7 7 77 77 77 77 77 77 77 77 77 77 77	\$		
CONSULTANT BREAKDOWN (Schedule G Attached?)			YES	VO
CANDIDATE COMMITTEES ONLY:				
/ALUE OF CAMPAIGN PROPERTY (From Schedule H - Atlach Sch	edulé H)	\$		
STATE COMMITTEES: Submit a reconciled campaign account ban	k statement in January of each yes	ar.		

Jul. 15. 2010 4:00PM

For instructions, See Back of Form

	審	SCHEDULE		ĺ
CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds)		(Rev. 07/03)	MONETARY RECEIPTS	
Committee NAME (Must be same as on Statement of Organization) Crowlood Co Domocratic Confrol Committee			CK THIS BOX IF NDING FORM	
The state of the s	Į.	101111111111111111111111111111111111111		,

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibite the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	V IF FOR FUND- RAISER INCOME
5ba	ID# CK# 1027	Redeposit Ck 1027 made Jayable to Patti Muhebace James Stenkenher	<u>.</u>	125,00	
6/2a	ю# ск# '7	James Steinteutler Dow City Da		50.∞	
	ID# CK#	3 1			
	ID# CK#	,			
· · · · · · · · · · · · · · · · · · ·	ID# CK#				
-	ID# CK#	·			
	ID#				
	ID#		<u> </u>		
	ID#				
<u> </u>	ID#				
	CK#		SUB-TOTAL	\$	
D lau k		TOTAL (if last page of the relationship of any relative making a contribution		\$175.00	

committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by manisge). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

MIN'S TAKE	12.400
DALLAND WALLE	
<u> </u>	انوسييس

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONE MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE YOWA ETHICS & CAMPAIGN DISCLOSURE SCARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	K THIS BOX IF NDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization) Crawford Co. Democratic Central Committee NAME AND ADDRESS TO WHOM EXPENDITURE (Disturgement) WAS MADE CANDIDATE AMOUNT DATE ID NUMBER (DESCRIBE TRANSACTION) EXPENDED (if applicable)
AND PAC
CHECK
NUMBER EXPENDED (MM/DD/YR) ID# Fair Boath \$ 8500 CK# 1036 ID# CK# /037 40.00 ID# CK# /038 40.00 ID# 40.00 CK# 1039 10# 6/22 CK# 104 D 250.00 ID# (pardline 1/4 100.00 CK#/04/ fD# CK# 1042 **-**0 ID# te Elect CK#1043 SUB-TOTAL

											Milk			

Purchases of centain compaign property costing \$500 or more must also be inventeded on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entitles providing consulting, advertising, fund-raising, politing, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the condidate's committee. (Refer to Schedule G instructions and lower Code 66A.402(8)(1).)

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TOTAL (If last page of this schedule)

\$805.00